

11 OCT 17 AM 11:30

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT ▼** Example: If typing, type over the lines.

12FE4M5

Georgians for Isakson

ADDRESS (number and street)

Post Office Box 250116

☐ Check if different than previously reported. (ACC)

Atlanta

GA

30325

2. **FEC IDENTIFICATION NUMBER ▼**

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C C00384693

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

GA

00

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

MM / DD / YYYY
11 / 02 / 2016

MM / DD / YYYY
02 / 02 / 2016

MM / DD / YYYY
2016

in the State of

GA

(c) 30-Day **POST**-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

MM / DD / YYYY
11 / 02 / 2016

MM / DD / YYYY
02 / 02 / 2016

MM / DD / YYYY
2016

in the State of

GA

5. Covering Period

MM / DD / YYYY
07 / 01 / 2011

MM / DD / YYYY
01 / 01 / 2011

MM / DD / YYYY
2011

through

MM / DD / YYYY
09 / 30 / 2011

MM / DD / YYYY
30 / 01 / 2011

MM / DD / YYYY
2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Jon Anderson

Signature of Treasurer

Date

MM / DD / YYYY
10 / 13 / 2011

MM / DD / YYYY
13 / 10 / 2011

MM / DD / YYYY
2011

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only

FEC FORM 3
(Revised 02/2003)